



Commissioner for Patents  
Washington, DC 20231  
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CONFIRMATION NO. 6753

Bib Data Sheet

<b>SERIAL NUMBER</b> 09/670,790	<b>FILING DATE</b> 09/27/2000 <b>RULE</b>	<b>CLASS</b> 710	<b>GROUP ART UNIT</b> 2181	<b>ATTORNEY DOCKET NO.</b> 402-093.17	
<b>APPLICANTS</b> Michael G. Engler, Stamford, CT; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED**</b> <b>** 11/21/2000</b> <b>SMALL ENTITY **</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CT	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 5	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> WILLIAM J. BRUCKER STETINA BRUNDA GARRED & BRUCKER 75 ENTERPRISE SUITE 250 ALISO VIEJO, CA 92656					
<b>TITLE</b> System for extending length of a connection to a usb peripheral					
<b>FILING FEE RECEIVED</b> 345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



## UNITED STATES PATENT AND TRADEMARK OFFICE

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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/670,790	<b>FILING DATE</b> 09/27/2000 <b>RULE</b> -	<b>CLASS</b> 361	<b>GROUP ART UNIT</b> 2841	<b>ATTORNEY DOCKET NO.</b> 402-093.17
<b>APPLICANTS</b> Michael G. Engler, Stamford, CT ;				
<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 11/21/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> CT	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 5
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 4955				
<b>TITLE</b> System for extending length of a connection to a usb peripheral				
<b>FILING FEE RECEIVED</b> 345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	